

Devin 150

Work Order ID 105465

August-06-13 11:05:17 AM

105465

Page

Item ID: D3953-7

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Spring Spacer

Start Date: 8/06/13 Start Qty: 40.00

40

Cust Item ID:

Required Date: 8/20/13 Req'd Qty: 40.00

40

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 13-08-06 Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D3953

C

100

0.00

100

Hardinge

Memo

0.00

Hardinge CNC Lathe Small

TURN AS PER FOLIO FA854 & DWG

FOLIO REV: 1/1

DWG REV: 2

DEBURR

2P 13.8.15 45 4

110

QC2- Inspect parts off machine FAI/FAIB

0.00

110

QC

Memo

0.00

Quality Control

2P 13.8.15 45 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
--------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 105465

August-06-13 11:05:17 AM

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Page 2

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Cust Item ID:

Required Date: 8/20/13 Req'd Qty: 40.00

40

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

QC8- Inspect parts - second check

0.00

120

QC

Memo

0.00

Quality Control

13-08-15

45

130

Identify as per dwg & Stock Location: ST076 0.00

130

Packaging

Memo

0.00

Packaging

45X 11.13-08-16

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

MCJ 13-08-21

MF 13-08-29

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

WORK ORDER

August-06-13 11:05:21 AM

Work Order ID: 105465

Parent Item: D3953-7

Parent Item Name: Spring Spacer

105465

D3953-7

Start Date: 8/06/13

Required Date: 8/20/13

Start Qty: 40.00

Required Qty: 40.00

Comments: IPP RevA: New issue DD verified by:EC
revC DD 10.03.02 verified by:EC

IPP Rev:B as per dwg

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MDEL RINR0.750		Purchased	No			100	f	45.0530	0.05	2.105263			

MDEL RINR0 750

Delrin Round Bar 0.75"

★★

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT018	45.053	
116183	4.8	
117273	4.665	
117322	0.94	
121783	27.49	
124957	7.158	

126591

1.702 24 13.8.15

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

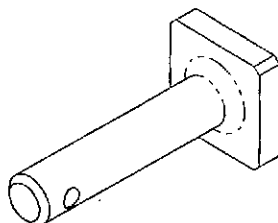
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

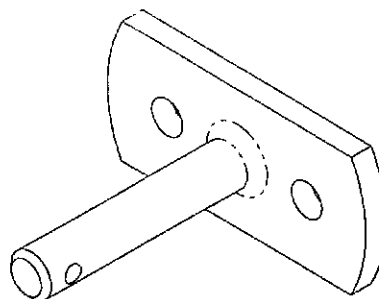
Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



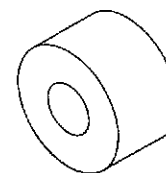
D3953-1 GAS SPRING BRACKET
(FULL LID)



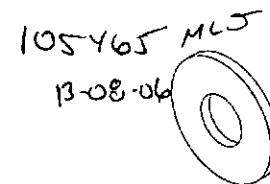
D3953-3 GAS SPRING STUD, LID



D3953-5 GAS SPRING STUD, BASE

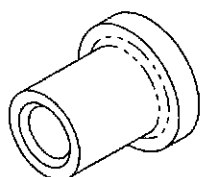


D3953-7 GAS SPRING SPACER

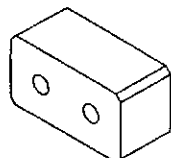


D3953-9 GAS SPRING WASHER

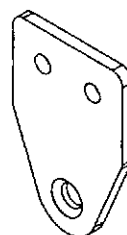
105465 MLS
13-08-06



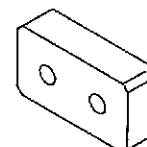
D3953-11 GAS SPRING SPACER



D3953-13 GAS SPRING SPACER
(FULL LID)



D3953-15 GAS SPRING BRACKET
(SPLIT LID)

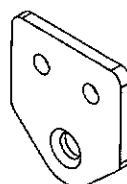


D3953-17 GAS SPRING SPACER
(SPLIT LID)



D3953-19 GAS SPRING BRACKET
(SQUARE BASKET)

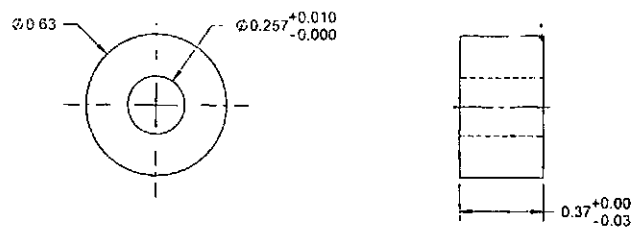
RELEASED
R 2010-02-26



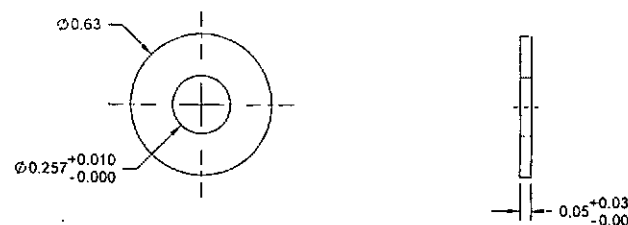
D3953-21 GAS SPRING BRACKET
(SQUARE BASKET)

C	PARTS -19 & -21 ADDED (SHT 1 & 4); CSK CALLOUT WAS CHAM (C6-2, B5-3, C6-4); C SYM WAS C SYM ABOUT (C7-2, C7-4); SECTION C-C REPOSITIONED TO B2.4 REASON: ADDL PARTS REQD, DRAFTING ERRORS	JPH	10.01.29
B	SHEET 3 ZONE C1 DIM 0.05 MIN WAS 0.13, MULTIPLE DIMENSIONS MIN/MAX REMOVED TOLERANCE ADDED REASON: DIFFICULTY INSTALLING COTTER PIN AT NEXT ASSY	AJS	09.11.11
A	NEW ISSUE	AJS	09.07.27
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	JPH		
CHECKED	92	DRAWING NO.	REV. C
MFG. APPR.	8	D3953	SHEET 1 OF 4
APPROVED	8	TITLE	SCALE
DE APPR.	8	GAS SPRING LID COMPONENTS	NTS
DATE	10.01.29	COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

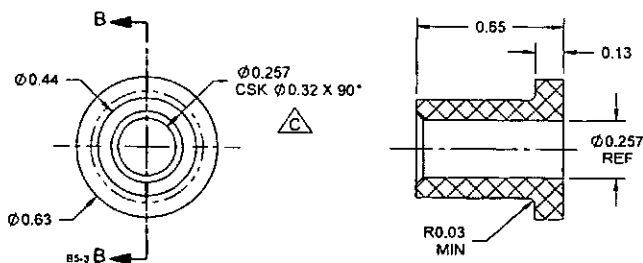
105465



D3953-7 GAS SPRING SPACER

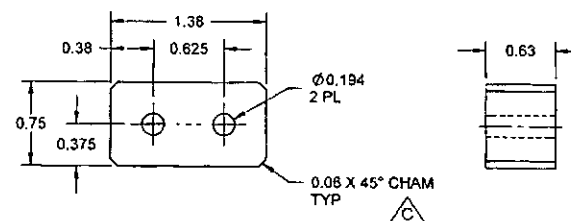


D3953-9 GAS SPRING WASHER



D3953-11 GAS SPRING SPACER

SECTION B-B 87-3



D3953-13 GAS SPRING SPACER

NOTES:

1) MATERIAL -7, -9 & -11: DELRIN II 150E OR ACETRON GP ACETAL, BLACK
REF DART SPEC M-DELRIN-R

-13: AISI 304 STAINLESS STEEL BAR
REF DART SPEC M304B

2) FINISH: N/A

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

6) IDENTIFICATION -13 ONLY: IDENTIFY WITH DART P/N "D3953-13" USING FINE POINT PERMANENT INK MARKER

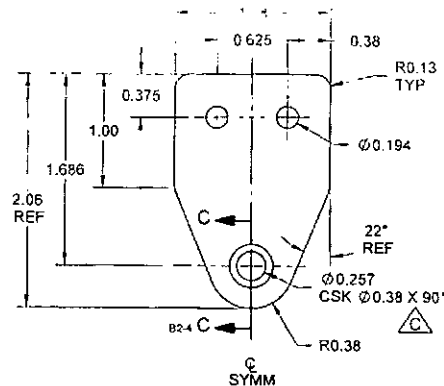
7) WEIGHT -7/-9/-11: < 0.01 lbs EACH

-13: 0.17 lbs

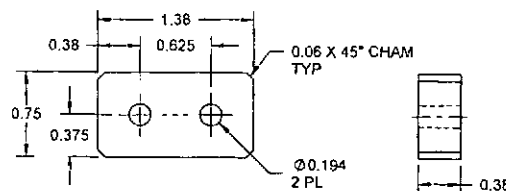
RELEASED
2010-02-26

DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	JPH		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. C
MFG. APPR.	<i>[Signature]</i>	D3953	SHEET 3 OF 4
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	GAS SPRING LID COMPONENTS	NTS
DATE	10.01.29	<small>COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS NOT TO BE REPRODUCED, COPIED, OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, WITHOUT PERMISSION FROM DART AEROSPACE LTD</small>	

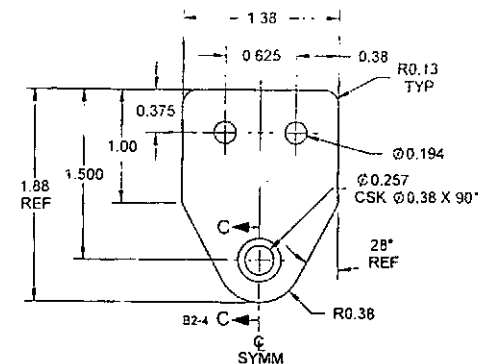
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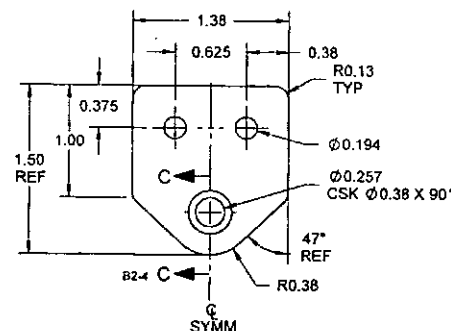
D3953-15 GAS SPRING BRACKET
(SPLIT LID)



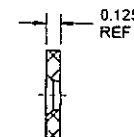
D3953-17 GAS SPRING SPACER
(SPLIT LID)



D3953-19 GAS SPRING BRACKET
(SQUARE BASKET)



D3953-21 GAS SPRING BRACKET
(SQUARE BASKET)



SECTION C-C

RELEASED
2010-02-26

NOTES:
1) MATERIAL -15/-19/-21: 304/316 STAINLESS STEEL SHEET ANNEALED 2B FINISH,
PER MIL-S-5059 OR AMS 5513/5524 OR ASTM A240 OR ASME SA240
REF DART SPEC M304S11GA

-17: AISI 304 STAINLESS STEEL BAR
REF DART SPEC M304B

- 2) FINISH: N/A
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3953-X" USING FINE POINT PERMANENT INK MARKER
7) WEIGHT -15: 0.08 lbs
-17: 0.10 lbs
-19: 0.07 lbs
-21: 0.06 lbs

DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	JPH		
CHECKED		DRAWING NO.	REV. C
MFG. APPR.		D3953	SHEET 4 OF 4
APPROVED		TITLE	SCALE
DE APPR.		GAS SPRING LID COMPONENTS	NTS
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